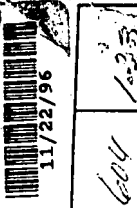


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UTILITY
SERIAL
NUMBER

SERIAL NUMBER

APPLICANTS

1. NAME, ADDRESS, AND
CITY, STATE, AND ZIP
2. PHONE NUMBER
3. EMPLOYER'S NAME, ADDRESS,
CITY, STATE, AND ZIP
4. TITLE

5. CLAIM NUMBER
6. DATE

None

None

None

FOR LON PT

Foreign priority claimed
35 USC 119 conditions

Verified and Acknowledged

ADDRESS

TITLE

PARTS OF APPI
FILED SEPARATE

NOTICE OF ALL

8-18

ISSU

Amount Due

1320.00

La
An

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	333	12/12/96
TYPIST	230	12/19/96
VERIFIER		
CORPS CORR.		
SPEC. HAND	230	2-18-97
FILE MAINT.	258	12-30-96
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final Original	
1	10/13/98
2	10/13/98
3	10/13/98
4	10/13/98
5	10/13/98
6	10/13/98
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49	10/13/98
50	10/13/98

SYMBOLS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
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